

INSTRUCTIONS ON REVERSE SIDE

NOMINATING PETITION

(COUNTYWIDE PARTISAN)

* The "Countywide" Partisan Petition form may be used by any partisan candidate. Exception: the form may not be used by a partisan candidate who seeks the office of County Commissioner; such candidates must use the "City/Township" Partisan Petition form.

We, the undersigned, registered and qualified voters of the County of _____, and State of Michigan, nominate _____, _____,
(Name of Candidate) (Street Address or Rural Route)

_____, as a candidate of the _____ Party for the office of * _____, _____,
 (City or Township) (Title - Office) (District, if Any)

to be voted for at the Primary Election to be held on the _____ day of _____, 20____

WARNING—A PERSON WHO KNOWINGLY SIGNS MORE PETITIONS FOR THE SAME OFFICE THAN THERE ARE POSITIONS TO BE ELECTED TO THE OFFICE OR SIGNS A NAME OTHER THAN HIS OR HER OWN IS VIOLATING THE PROVISIONS OF THE MICHIGAN ELECTION LAW.

INDICATE CITY OR TOWNSHIP IN WHICH REGISTERED TO VOTE	SIGNATURE	PRINTED NAME	STREET ADDRESS OR RURAL ROUTE	ZIP CODE	DATE OF SIGNING		
					MONTH	DAY	YEAR
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	1.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	2.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	3.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	4.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	5.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	6.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	7.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	8.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	9.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	10.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	11.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	12.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	13.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	14.						
CITY OF <input type="checkbox"/> TOWNSHIP OF <input type="checkbox"/>	15.						

CERTIFICATE OF CIRCULATION

The undersigned circulator of the above petition asserts that he or she personally solicited and induced each signatory to sign the petition, that each signature on the petition was signed in his or her presence; and that, to his or her best knowledge and belief, each signature is the genuine signature of the person purporting to sign the petition, the person signing the petition was at the time of signing a qualified registered elector of the City or Township indicated preceding the signature, and the elector was qualified to sign the petition.

WARNING—A CIRCULATOR KNOWINGLY MAKING A FALSE STATEMENT IN THE ABOVE CERTIFICATE, A PERSON NOT A CIRCULATOR WHO SIGNS AS A CIRCULATOR, OR A PERSON WHO SIGNS A NAME OTHER THAN HIS OR HER OWN AS CIRCULATOR IS GUILTY OF A MISDEMEANOR.

**CIRCULATOR – DO NOT SIGN OR DATE
CERTIFICATE UNTIL AFTER CIRCULATING PETITION.**

(Signature of Circulator)

(Date)

(Printed Name of Circulator)

Complete Residence Address (Street and Number or Rural Route)

(Zip Code)

READ BEFORE CIRCULATING PETITION

The validity of signatures placed on this petition may be affected if the following is not observed.

Complete the heading of the petition before circulating it.

- Enter the county where the petition will be circulated. Do not list more than one county.
- Enter the candidate's complete name and address, the office the candidate seeks and the candidate's political party affiliation. Include the district number of the office if there is one.
- Enter the date of the primary election.

Make sure that all signers properly complete the petition.

- Each signer must enter his or her city or township of registration and indicate whether the jurisdiction listed is a "city" or a "township." The city or township entered by the voter must be in the county listed in the sheet's heading.
- Each signer must print his or her first and last name.¹
- Each signer must enter his or her full address. A rural route number is acceptable. A post office box is not acceptable.
- Each signer must enter his or her Zip Code.²
- Each signer must enter his or her signature with the month, day and year.

Complete the circulation certificate after circulating the petition.

- Sign and date your certificate with the month, day and year.¹ Signatures on the petition which are dated after the date on the circulation certificate are invalid.
- Enter your full address. A rural route number is acceptable. A post office box is not acceptable.
- Enter your Zip Code.²

Circulate the petition properly.

- Do not fail to question signers on their signatures. Signatures of persons who have been previously disqualified are not to be fixed on the petition.
- Do not complete the heading of the petition after signatures have been fixed on the petition.
- Do not leave the petition unattended.

¹ The failure of the circulator or an elector who signs the petition to print his or her name or to print his or her name in the proper location does not affect the validity of the circulation certificate or the circulator's signature. However, a printed name located in the space designated for printing names does not constitute the signature of the circulator or elector.

² The failure of the circulator or an elector who signs the petition to enter a Zip Code or to enter his or her correct Zip Code does not affect the validity of the circulation certificate or the circulator's signature.

